



6-22-04

EXPRESS MAIL NO. EV447226396US

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2825  
IFW**TRANSMITTAL  
FORM**(To be used for all correspondence  
after initial filing)

Application Number	10/061,949
Filing Date	January 31, 2002
First Named Inventor	Amedeo La Scala
Art Unit	2825
Examiner Name	Annette M. Thompson
Attorney Docket No.	851763.424

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**BOX AF****ENCLOSURES (check all that apply)**

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| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment/Response<br><input checked="" type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement; Form PTO-1449<br><input type="checkbox"/> Cited References<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts under 37 C.F.R. 1.52 or 1.53<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Request for Corrected Filing Receipt<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address<br><input type="checkbox"/> Declaration<br><input type="checkbox"/> Statement under 37 CFR 3.73(b)<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund | <input type="checkbox"/> CD(s), Number of CD(s) _____<br><input type="checkbox"/> After Allowance Communication to Technology Center (TC)<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC ( <i>Appeal Notice, Brief, Reply Brief</i> )<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Return Receipt Postcard<br><input type="checkbox"/> Additional Enclosure(s) ( <i>please identify below</i> ):<br>_____<br>_____<br>_____ |
|---|---|--|

Remarks

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Individual Name	E. Russell Tarleton	Customer Number <b>00500</b>
Signature	<i>E. Russell Tarleton</i>	
Date	June 21, 2004	

**CERTIFICATE OF TRANSMISSION/MAILING**

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EXPRESS MAIL NO. EV447226396US

**RESPONSE UNDER 37 C.F.R. § 1.116  
EXPEDITED PROCEDURE - EXAMINING GROUP 2820**

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Amedeo La Scala  
Application No. : 10/061,949  
Filed : January 31, 2002  
For : PROCESS AND SYSTEM FOR MANAGEMENT OF TEST  
ACCESS PORT (TAP) FUNCTIONS

Examiner : Annette M. Thompson  
Art Unit : 2825  
Docket No. : 851763.424  
Date : June 21, 2004

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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**RESPONSE UNDER 37 CFR 1.116**

Commissioner for Patents:

In response to the Office Action dated April 21, 2004, please amend the application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 6 of this paper.